## CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

APR - 4 2011

Date Received

A Public Document

Please type or print in ink.

Pl	ease type or print in ink.		Human Resource Division	
NA	ME OF FILER (LAST)	(FIRST)	(MIDDLE)	
	Macht	Patricia	· K.	
1.	Office, Agency, or Court			
	Agency Name			
	California Public Employees' Retirement System			
	Division, Board, Department, District, if applicable	Your Position	ā	
	External Affairs	Deputy Executiv	ve Officer, External Affairs	
	▶ If filing for multiple positions, list below or on an attachment.			
	Agency:	Position:		
2.	Jurisdiction of Office (Check at least one box)	20		
	State     State	☐ Judge (Statewide Ju	risdiction)	
	Multi-County	County of		
	☐ City of	Other		
3.	Type of Statement (Check at least one box)			
	Annual: The period covered is January 1, 2010, through December 31, 2010.	Leaving Office: Da (Check one)	ate Left	
	The period covered is, through December 31, 2010.	The period cove leaving office.	red is January 1, 2010, through the date of	
	Assuming Office: Date	<ul> <li>The period cove of leaving office.</li> </ul>	red is, through the date	
	Candidate: Election Year Office sought, if different	erent than Part 1:		
4.	Schedule Summary			
	Check applicable schedules or "None." ► T	otal number of pages inclu	ding this cover page:	
	Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loa	ans, & Business Positions – schedule attached	
	Schedule A-2 - Investments – schedule attached	Schedule D - Income - G	iffs – schedule attached	
	Schedule B - Real Property – schedule attached	Schedule E - Income - G	ifts - Travel Payments - schedule attached	
	-or-  None - No reportable interests on any schedule			
5.	Verification	V		
			*	
			:ained	
	I certify under penalty of perjury under the laws of the State of Californi			
	Date Signed April 4, 2011 Sig			
	(month, day, year)			

# SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

#### AMENDMENT

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
/ , State of CA Savings Plus	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
401k international fund	
FAIR MARKET VALUE	FAIR MARKET VALUE
<b>∑</b> \$2,000 - \$10,000	<b>☒</b> \$2,000 - \$10,000 <b>☐</b> \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT nonregistered fund  (Describe)	NATURE OF INVESTMENT
(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
2 . Savings Plus - Small Cap Fund	Savings Plus Bond Index Fund
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	■ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Nonregistered fund	NATURE OF INVESTMENT Bonds
	Z Still Z
Partnership () Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/
► NAME OF BUSINESS ENTITY	Verification
3 ,Savings Plus - Midcap Stock Fund	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Print Name
	office, Agency CalPERS
FAIR MARKET VALUE	_
\$2,000 - \$10,000	Statement Type  2010/2011 Annual  Assuming  Leaving  Candidate
.NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have
Stock Other(Describe)	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed
/ / 10 / / 10	Date 0.31.00
ACQUIRED DISPOSED	
'1	Signature
Comments:	

### **SCHEDULE A-1** Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

► NAME OF BUSINESS ENTITY   Savings Plus Short Term Inv Fund	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
privately invested mutual fund	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \times \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Nonregistered short term	NATURE OF INVESTMENT
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	OFNERAL DESCRIPTION OF PURINESS ASTRUCTA
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$1,000,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	MATURE OF INVESTMENT
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> </u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Verification
	Print Name
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
	or Court
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	Statement Type  2010/2011 Annual  Assuming Leaving
\$100,001 - \$10,000 S10,000 Over \$1,000,000	Annual Candidate
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have
Stock Other(Describe)	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	4/4/11
/ / 10 / / 10	Date Signed 7/ 7///
ACQUIRED DISPOSED	Signature
The state of the s	Signature
Comments:	